

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

ADDRESS (number and street) ONE GEICO PLAZA
 Check if different than previously reported. (ACC)
WASHINGTON DC 20076

2. **FEC IDENTIFICATION NUMBER** C00343749
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 07 01 2008 through 09 30 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Michael Campbell

Signature of Treasurer Electronically Filed by Michael Campbell Date 10 09 2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		22483.52
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	25112.52									
(c) Total Receipts (from Line 19)	5292.00	18421.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	30404.52	40904.52								
7. Total Disbursements (from Line 31)	6000.00	16500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	24404.52	24404.52								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
 999 E street, NW
 Washington, DC 20463

Toll Free 800-424-9530
 Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	2820.00	8160.00
(i) Itemized (use Schedule A)	2472.00	10261.00
(ii) Unitemized	5292.00	18421.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	5292.00	18421.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	5292.00	18421.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5292.00	18421.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6000.00	16500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	6000.00	16500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6000.00	16500.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	5292.00	18421.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5292.00	18421.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Martha Furnas	Date of Receipt MM / DD / YYYY 07 / 24 / 2008
	Mailing Address 5218 N Fairway Heights Dr	Transaction ID: SA11AI.18063
	City State Zip Code Tucson AZ 85749	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	Payroll deduction \$5.00 biweekly
	Name of Employer Occupation GEICO manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2075.00	

B.	Full Name (Last, First, Middle Initial) Martha Furnas	Date of Receipt MM / DD / YYYY 08 / 25 / 2008
	Mailing Address 5218 N Fairway Heights Dr	Transaction ID: SA11AI.18172
	City State Zip Code Tucson AZ 85749	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	Payroll deduction \$5.00 biweekly
	Name of Employer Occupation GEICO manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2085.00	

C.	Full Name (Last, First, Middle Initial) Martha Furnas	Date of Receipt MM / DD / YYYY 09 / 17 / 2008
	Mailing Address 5218 N Fairway Heights Dr	Transaction ID: SA11AI.18283
	City State Zip Code Tucson AZ 85749	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	Payroll deduction \$5.00 biweekly
	Name of Employer Occupation GEICO manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2095.00	

SUBTOTAL of Receipts This Page (optional)	30.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) John Geer		Date of Receipt
	Mailing Address 2902 Gretna Place		<input type="text" value="07"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City Vienna	State VA	Zip Code 22181
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18064
	Amount of Each Receipt this Period 40.00		Payroll deduction \$20.00 biweekly
Name of Employer GEICO		Occupation AVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) John Geer		Date of Receipt
	Mailing Address 2902 Gretna Place		<input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City Vienna	State VA	Zip Code 22181
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18173
	Amount of Each Receipt this Period 40.00		Payroll deduction \$20.00 biweekly
Name of Employer GEICO		Occupation AVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 340.00	

C.	Full Name (Last, First, Middle Initial) John Geer		Date of Receipt
	Mailing Address 2902 Gretna Place		<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City Vienna	State VA	Zip Code 22181
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18284
	Amount of Each Receipt this Period 40.00		Payroll deduction \$20.00 biweekly
Name of Employer GEICO		Occupation AVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 380.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="120.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) John Izzo		Date of Receipt
	Mailing Address 58 Malvern Lakes Circle #201		<input type="text" value="07"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Fredericksburg	VA	22406
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GEICO		Occupation VP	Transaction ID: SA11AI.18068
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="50.00"/>
		<input type="text" value="295.00"/>	Payroll deduction \$25.00 biweekly

B.	Full Name (Last, First, Middle Initial) John Izzo		Date of Receipt
	Mailing Address 58 Malvern Lakes Circle #201		<input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Fredericksburg	VA	22406
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GEICO		Occupation VP	Transaction ID: SA11AI.18177
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="50.00"/>
		<input type="text" value="345.00"/>	Payroll deduction \$25.00 biweekly

C.	Full Name (Last, First, Middle Initial) John Izzo		Date of Receipt
	Mailing Address 58 Malvern Lakes Circle #201		<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Fredericksburg	VA	22406
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GEICO		Occupation VP	Transaction ID: SA11AI.18289
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="50.00"/>
		<input type="text" value="395.00"/>	Payroll deduction \$25.00 biweekly

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="150.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Richard Kidd		Date of Receipt
	Mailing Address 4645 Buckhorn Ridge		<input type="text" value="07"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City Fairfax	State VA	Zip Code 22030
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18072
	Name of Employer GEICO		Occupation AVP
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="225.00"/>
		Amount of Each Receipt this Period <input type="text" value="30.00"/>	
		Payroll deduction \$15.00 biweekly	

B.	Full Name (Last, First, Middle Initial) Richard Kidd		Date of Receipt
	Mailing Address 4645 Buckhorn Ridge		<input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City Fairfax	State VA	Zip Code 22030
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18181
	Name of Employer GEICO		Occupation AVP
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="255.00"/>
		Amount of Each Receipt this Period <input type="text" value="30.00"/>	
		Payroll deduction \$15.00 biweekly	

C.	Full Name (Last, First, Middle Initial) Richard Kidd		Date of Receipt
	Mailing Address 4645 Buckhorn Ridge		<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City Fairfax	State VA	Zip Code 22030
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18293
	Name of Employer GEICO		Occupation AVP
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="285.00"/>
		Amount of Each Receipt this Period <input type="text" value="30.00"/>	
		Payroll deduction \$15.00 biweekly	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="90.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 23		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Paul Lavrey		Date of Receipt MM / DD / YYYY 07 / 24 / 2008
	Mailing Address 3495 Pleasant Grove Drive		Transaction ID: SA11AI.18078
	City Ijamsville	State MD	Zip Code 21754
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
	Name of Employer GEICO	Occupation Director	Payroll deduction \$20.00 biweekly

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00
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B.	Full Name (Last, First, Middle Initial) Paul Lavrey		Date of Receipt MM / DD / YYYY 08 / 25 / 2008
	Mailing Address 3495 Pleasant Grove Drive		Transaction ID: SA11AI.18187
	City Ijamsville	State MD	Zip Code 21754
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
	Name of Employer GEICO	Occupation Director	Payroll deduction \$20.00 biweekly

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00
---	------------------------------------

C.	Full Name (Last, First, Middle Initial) Paul Lavrey		Date of Receipt MM / DD / YYYY 09 / 17 / 2008
	Mailing Address 3495 Pleasant Grove Drive		Transaction ID: SA11AI.18299
	City Ijamsville	State MD	Zip Code 21754
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
	Name of Employer GEICO	Occupation Director	Payroll deduction \$20.00 biweekly

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00
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SUBTOTAL of Receipts This Page (optional)	▶	120.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 23
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Paul W Measley

Mailing Address 9539 E. Surprise Canyon Ct.

City Tucson State AZ Zip Code 85748

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 07 / 24 / 2008
Transaction ID: SA11AI.18092
 Amount of Each Receipt this Period: 40.00
 Payroll deduction \$20.00 biweekly

B.

Full Name (Last, First, Middle Initial)
Paul W Measley

Mailing Address 9539 E. Surprise Canyon Ct.

City Tucson State AZ Zip Code 85748

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 08 / 25 / 2008
Transaction ID: SA11AI.18202
 Amount of Each Receipt this Period: 40.00
 Payroll deduction \$20.00 biweekly

C.

Full Name (Last, First, Middle Initial)
Paul W Measley

Mailing Address 9539 E. Surprise Canyon Ct.

City Tucson State AZ Zip Code 85748

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 09 / 17 / 2008
Transaction ID: SA11AI.18312
 Amount of Each Receipt this Period: 40.00
 Payroll deduction \$20.00 biweekly

SUBTOTAL of Receipts This Page (optional) ► 120.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Robert Miller		Date of Receipt
	Mailing Address 3025 Amherst Avenue		<input type="text" value="07"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Dallas	TX	75225
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18093
Name of Employer GEICO		Occupation Regional VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="40.00"/>
		<input type="text" value="300.00"/>	Payroll deduction \$20.00 biweekly

B.	Full Name (Last, First, Middle Initial) Robert Miller		Date of Receipt
	Mailing Address 3025 Amherst Avenue		<input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Dallas	TX	75225
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18203
Name of Employer GEICO		Occupation Regional VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="40.00"/>
		<input type="text" value="340.00"/>	Payroll deduction \$20.00 biweekly

C.	Full Name (Last, First, Middle Initial) Robert Miller		Date of Receipt
	Mailing Address 3025 Amherst Avenue		<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Dallas	TX	75225
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18313
Name of Employer GEICO		Occupation Regional VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="40.00"/>
		<input type="text" value="380.00"/>	Payroll deduction \$20.00 biweekly

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="120.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Olza Nicely

Mailing Address 805 Nethercliffe Hall Road

City State Zip Code
Great Falls VA 22066

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GEICO President-Insurance operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1275.00

Date of Receipt
MM / DD / YYYY
07 / 24 / 2008

Transaction ID: SA11AI.18100

Amount of Each Receipt this Period
170.00

Payroll deduction \$85.00 biweekly

B. Full Name (Last, First, Middle Initial)
Olza Nicely

Mailing Address 805 Nethercliffe Hall Road

City State Zip Code
Great Falls VA 22066

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GEICO President-Insurance operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1445.00

Date of Receipt
MM / DD / YYYY
08 / 25 / 2008

Transaction ID: SA11AI.18210

Amount of Each Receipt this Period
170.00

Payroll deduction \$85.00 biweekly

C. Full Name (Last, First, Middle Initial)
Olza Nicely

Mailing Address 805 Nethercliffe Hall Road

City State Zip Code
Great Falls VA 22066

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GEICO President-Insurance operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1615.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2008

Transaction ID: SA11AI.18321

Amount of Each Receipt this Period
170.00

Payroll deduction \$85.00 biweekly

SUBTOTAL of Receipts This Page (optional) ► 510.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Nancy Pierce		Date of Receipt
	Mailing Address 100 Queen St		<input type="text" value="07"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Alexandria	VA	22314
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GEICO		Occupation VP	Transaction ID: SA11AI.18107
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="80.00"/>
		<input type="text" value="440.00"/>	Payroll deduction \$40.00 biweekly

B.	Full Name (Last, First, Middle Initial) Nancy Pierce		Date of Receipt
	Mailing Address 100 Queen St		<input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Alexandria	VA	22314
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GEICO		Occupation VP	Transaction ID: SA11AI.18217
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="80.00"/>
		<input type="text" value="520.00"/>	Payroll deduction \$40.00 biweekly

C.	Full Name (Last, First, Middle Initial) Nancy Pierce		Date of Receipt
	Mailing Address 100 Queen St		<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Alexandria	VA	22314
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GEICO		Occupation VP	Transaction ID: SA11AI.18328
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="80.00"/>
		<input type="text" value="600.00"/>	Payroll deduction \$40.00 biweekly

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="240.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Dana Proulx		Date of Receipt
	Mailing Address 1011 Avery Court, S.W.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 24 / 2008
	City	State	Zip Code
	Vienna	VA	22180
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18110
Name of Employer GEICO		Occupation manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 330.00	Payroll deduction \$25.00 biweekly

B.	Full Name (Last, First, Middle Initial) Dana Proulx		Date of Receipt
	Mailing Address 1011 Avery Court, S.W.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 25 / 2008
	City	State	Zip Code
	Vienna	VA	22180
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18220
Name of Employer GEICO		Occupation manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 380.00	Payroll deduction \$25.00 biweekly

C.	Full Name (Last, First, Middle Initial) Dana Proulx		Date of Receipt
	Mailing Address 1011 Avery Court, S.W.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 17 / 2008
	City	State	Zip Code
	Vienna	VA	22180
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18331
Name of Employer GEICO		Occupation manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 430.00	Payroll deduction \$25.00 biweekly

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 150.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Jess Reed		Date of Receipt
	Mailing Address 8500 Hawkins Creamery Road		<input type="text" value="07"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Gaithersburg	MD	20886
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GEICO		Occupation VP	Transaction ID: SA11AI.18111
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="270.00"/>	<input type="text" value="40.00"/>
			Payroll deduction \$20.00 biweekly

B.	Full Name (Last, First, Middle Initial) Jess Reed		Date of Receipt
	Mailing Address 8500 Hawkins Creamery Road		<input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Gaithersburg	MD	20886
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GEICO		Occupation VP	Transaction ID: SA11AI.18221
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="310.00"/>	<input type="text" value="40.00"/>
			Payroll deduction \$20.00 biweekly

C.	Full Name (Last, First, Middle Initial) Jess Reed		Date of Receipt
	Mailing Address 8500 Hawkins Creamery Road		<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Gaithersburg	MD	20886
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GEICO		Occupation VP	Transaction ID: SA11AI.18332
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="350.00"/>	<input type="text" value="40.00"/>
			Payroll deduction \$20.00 biweekly

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="120.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 23		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) William Roberts		Date of Receipt
	Mailing Address 6529 79th Place		<input type="text" value="07"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Cabin John	MD	20818
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18114
Name of Employer GEICO		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="150.00"/>
		<input type="text" value="925.00"/>	Payroll deduction \$75.00 biweekly

B.	Full Name (Last, First, Middle Initial) William Roberts		Date of Receipt
	Mailing Address 6529 79th Place		<input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Cabin John	MD	20818
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18225
Name of Employer GEICO		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="150.00"/>
		<input type="text" value="1075.00"/>	Payroll deduction \$75.00 biweekly

C.	Full Name (Last, First, Middle Initial) William Roberts		Date of Receipt
	Mailing Address 6529 79th Place		<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Cabin John	MD	20818
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18335
Name of Employer GEICO		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="150.00"/>
		<input type="text" value="1225.00"/>	Payroll deduction \$75.00 biweekly

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="450.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 23
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Daniel Schechter

Mailing Address 9016 Mistwood Drive

City Potomac State MD Zip Code 20854-2884

FEC ID number of contributing federal political committee. **C**

Name of Employer GEICO Occupation AVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 07 / 24 / 2008
Transaction ID: SA11AI.18120
 Amount of Each Receipt this Period: 10.00
 Payroll deduction \$5.00 biweekly

B.

Full Name (Last, First, Middle Initial)
Daniel Schechter

Mailing Address 9016 Mistwood Drive

City Potomac State MD Zip Code 20854-2884

FEC ID number of contributing federal political committee. **C**

Name of Employer GEICO Occupation AVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 335.00

Date of Receipt: 08 / 25 / 2008
Transaction ID: SA11AI.18231
 Amount of Each Receipt this Period: 10.00
 Payroll deduction \$5.00 biweekly

C.

Full Name (Last, First, Middle Initial)
Daniel Schechter

Mailing Address 9016 Mistwood Drive

City Potomac State MD Zip Code 20854-2884

FEC ID number of contributing federal political committee. **C**

Name of Employer GEICO Occupation AVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt: 09 / 17 / 2008
Transaction ID: SA11AI.18341
 Amount of Each Receipt this Period: 10.00
 Payroll deduction \$5.00 biweekly

SUBTOTAL of Receipts This Page (optional) ► 30.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Louis Simpson

Mailing Address 800 North Michigan Ave, Unit 4501

City Chicago State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C**

Name of Employer Plaza Investment Managers Occupation President - Capital operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 24 / 2008
Transaction ID: SA11AI.18123
Amount of Each Receipt this Period 100.00
Payroll deduction \$50.00 biweekly

B. Full Name (Last, First, Middle Initial)
Louis Simpson

Mailing Address 800 North Michigan Ave, Unit 4501

City Chicago State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C**

Name of Employer Plaza Investment Managers Occupation President - Capital operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 25 / 2008
Transaction ID: SA11AI.18234
Amount of Each Receipt this Period 100.00
Payroll deduction \$50.00 biweekly

C. Full Name (Last, First, Middle Initial)
Louis Simpson

Mailing Address 800 North Michigan Ave, Unit 4501

City Chicago State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C**

Name of Employer Plaza Investment Managers Occupation President - Capital operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 17 / 2008
Transaction ID: SA11AI.18344
Amount of Each Receipt this Period 100.00
Payroll deduction \$50.00 biweekly

SUBTOTAL of Receipts This Page (optional) ▶ 300.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Joseph Thomas		Date of Receipt
	Mailing Address 1708 Dalwood Meadows		<input type="text" value="07"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Virginia Beach	VA	23455
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18131
Name of Employer GEICO		Occupation AVP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
		<input type="text" value="375.00"/>	Payroll deduction \$25.00 biweekly

B.	Full Name (Last, First, Middle Initial) Joseph Thomas		Date of Receipt
	Mailing Address 1708 Dalwood Meadows		<input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Virginia Beach	VA	23455
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18242
Name of Employer GEICO		Occupation AVP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
		<input type="text" value="425.00"/>	Payroll deduction \$25.00 biweekly

C.	Full Name (Last, First, Middle Initial) Joseph Thomas		Date of Receipt
	Mailing Address 1708 Dalwood Meadows		<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Virginia Beach	VA	23455
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18352
Name of Employer GEICO		Occupation AVP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
		<input type="text" value="475.00"/>	Payroll deduction \$25.00 biweekly

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="150.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mary Zarcone		Date of Receipt
	Mailing Address 219 Westchester Drive		<input type="text" value="07"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Macon	GA	31210
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GEICO		Occupation VP	Transaction ID: SA11AI.18141
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="40.00"/>
		<input type="text" value="300.00"/>	Payroll deduction \$20.00 biweekly

B.	Full Name (Last, First, Middle Initial) Mary Zarcone		Date of Receipt
	Mailing Address 219 Westchester Drive		<input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Macon	GA	31210
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GEICO		Occupation VP	Transaction ID: SA11AI.18252
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="40.00"/>
		<input type="text" value="340.00"/>	Payroll deduction \$20.00 biweekly

C.	Full Name (Last, First, Middle Initial) Mary Zarcone		Date of Receipt
	Mailing Address 219 Westchester Drive		<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Macon	GA	31210
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer GEICO		Occupation VP	Transaction ID: SA11AI.18362
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="40.00"/>
		<input type="text" value="380.00"/>	Payroll deduction \$20.00 biweekly

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="120.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="2820.00"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) BOB SCHAFFER FOR US SENATE	Transaction ID: SB23.18032 Date of Disbursement
	Mailing Address PO BOX 102135	<input type="text" value="07"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City DENVER State CO Zip Code 80250	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign contribution	<input type="text" value="2000.00"/>
	Candidate Name BOB SCHAFFER FOR US SENATE	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Friends of John Barrasso	Transaction ID: SB23.18033 Date of Disbursement
	Mailing Address 6896 Casper Mountain Road	<input type="text" value="08"/> / <input type="text" value="11"/> / <input type="text" value="2008"/>
	City Casper State WY Zip Code 82601	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign contribution	<input type="text" value="1000.00"/>
	Candidate Name Friends of John Barrasso	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WY District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Thelma Drake for Congress	Transaction ID: SB23.18020 Date of Disbursement
	Mailing Address P.O. Box 61480	<input type="text" value="07"/> / <input type="text" value="13"/> / <input type="text" value="2008"/>
	City Virginia Beach State VA Zip Code 23466	Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign contribution	<input type="text" value="1000.00"/>
	Candidate Name Thelma Drake for Congress	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 02	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 / 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

GOVERNMENT EMPLOYEES INSURANCE COMPANY POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

WICKER FOR SENATE

Mailing Address PO BOX 64

City JACKSON State MS Zip Code 39205

Purpose of Disbursement
Campaign contribution

Candidate Name
WICKER FOR SENATE

Office Sought: House
 Senate
 President

State: MS District: 00

Disbursement For: 2008
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.18027

Date of Disbursement

07 / 28 / 2008

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

TOTAL This Period (last page this line number only) ▶

6000.00